

**TEXAS DEPARTMENT OF PUBLIC SAFETY**  
**ENDANGERED MISSING PERSONS ALERT REQUEST FORM**  
Fax (512) 424-2281 or (512) 451-2291; and Call (512) 424-2277 or 2208  
**MAXIMUM ACTIVATION - 24 HOURS**

**Reporting Agency Information**

YES NO  
☐ ☐

Date of Request

Name of Reporting Agency

Contact number for Reporting Agency

Fax number for Reporting Agency

Name/Title of Investigating Officer

Cell phone number for Investigating Officer

Phone number for media inquiries

1. Has the missing person been diagnosed with an Intellectual Disability (Diagnosis could refer to what was previously described as Mental Retardation) and/or a Pervasive Developmental Disorder, including Asperger's Disorder, Autistic Disorder, Autism Spectrum Disorder, Childhood Disintegrative Disorder, Rett's Disorder or a Pervasive Developmental Disorder (Not Otherwise Specified)?

If the missing person has been diagnosed with an Intellectual Disability, law enforcement shall require a written diagnosis from a physician or psychologist licensed to practice within Texas, or certified by the Texas Department of Aging and Disability Services and/or Texas Department of State Health Services. *Written diagnosis could indicate the physician or psychologist was certified by the former Texas Department of Mental Health and Mental Retardation.*

2. Is it confirmed that an investigation has taken place, verifying that a reasonable explanation for the missing person's disappearance has been ruled out and that the disappearance poses a credible threat to the health and safety of the missing person?

3. Is the Endangered Missing Persons Alert request being made within 72 hours of the missing person's disappearance?

4. Is there sufficient information available to disseminate to the public that could assist in locating the missing person? (Highway signs will be activated only if accurate vehicle information is available AND it is confirmed that the missing person was in the vehicle at the time of the disappearance).

**IMPORTANT:** Agencies are responsible for accurately answering the above questions. The Department of Public Safety will verify circumstances of each request to ensure criteria have been met. Do **NOT** send request if the answer is **NO** to **ANY** of these questions. **If activated, your request is only valid for a period of 24 hours.** You will be contacted 12 hours, 18 hours, and 23 hours after activation. Any extension must be requested prior to or during the 23 hour reminder from the State Operations Center. Contact (512) 424-2277 or 2208 for all extension requests.

Date of last contact: \_\_\_\_\_ Time: \_\_\_\_\_

Last known location: \_\_\_\_\_

**MISSING PERSONS DATA**

NIC #: \_\_\_\_\_

Name: \_\_\_\_\_ Diagnosis: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ DOB: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_ Clothing: \_\_\_\_\_

Unique Physical Characteristics: \_\_\_\_\_

**VEHICLE DATA**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

LP-State: \_\_\_\_\_ Number: \_\_\_\_\_

Any other descriptors: \_\_\_\_\_